## 2007-2008 Course Approval Application Joint Technological Education Districts

<b>Course Approval Application</b>	is due January 1, 2007					
Name of Joint Technological Education District (JTED):			CTDS#:			
JTED Mailing Address:			City:	ZIP :		
JTED Physical Address (if diffe	erent):		City:		ZIP :	
JTED Superintendent:		Phone :	I	Email :		
Contact Person:		Phone:	Email:			
The	_ Joint Technological	Education Dis	trict assures the A	Arizona De	epartment of	
<ul><li>and signed by the local</li><li>IGA will be submitted</li></ul>	reement (IGA) with part governing board and the to the Joint Legislative E ned in this Application fo	e JTED governing	ng board. ee (JLBC) for revie	w.	7 11	
Signature of Joint Technologi	re of Joint Technological District Superintendent  Date of Signature 1			ate of Signa	gnature	
List below all participating ed	ucation institutions for	which an IGA	will be completed:			
Education Institution Name	CTDS Number:		Education Institutio	n Name	CTDS Number	

## **Note:**

This application is for ADM funding purposes only. If the JTED anticipates applying for the Carl Perkins Basic Grant and generating State Block Grant funds to be paid to the JTED directly, the JTED must also submit a "Notification of Intent" form for the program in addition to the Application for Course Approval. If the Carl Perkins funds and State Block Grant funds are paid to the comprehensive high school districts, the "Notification of Intent" must be submitted by the appropriate school district.

## **Program and Course Information**

Submit this form for each program offered. Courses may be offered at multiple sites; each site must be listed in the table below. If course is offered at more than four sites, continue to add the additional sites in the cell and attach the additional pages.

Name of JTED:	Contact Person:	Phone:	_Email:
Program Name:	Program CIP Code:		
•		*	
Program will lead to industry validated assessr	ment or certification:YesNo		

## List below the sequence of courses taught in this program: **Course Title** Locations where course is taught. (high Site Is location a **Instructor will have Course** Course schools, community college campus, **Approved** central location appropriate CTE **CIP Code CTDS** JTED campus, etc). Programs/courses Certification or satellite? Please (ADE use Number may be taught in multiple locations Check below: check box below.. Only) (sites). Satellite Central Site 1 \_\_Yes \_\_No Site 2 Site 3 Site 4 Site 5: Site 1 \_\_Yes \_\_No Site 2 Site 3 Site 4 Site 5 Site 1 Yes No Site 2 Site 3 Site 4

Site 5: